Medical Inspector General – Update on Inspection Program and Navy Medicine Trends

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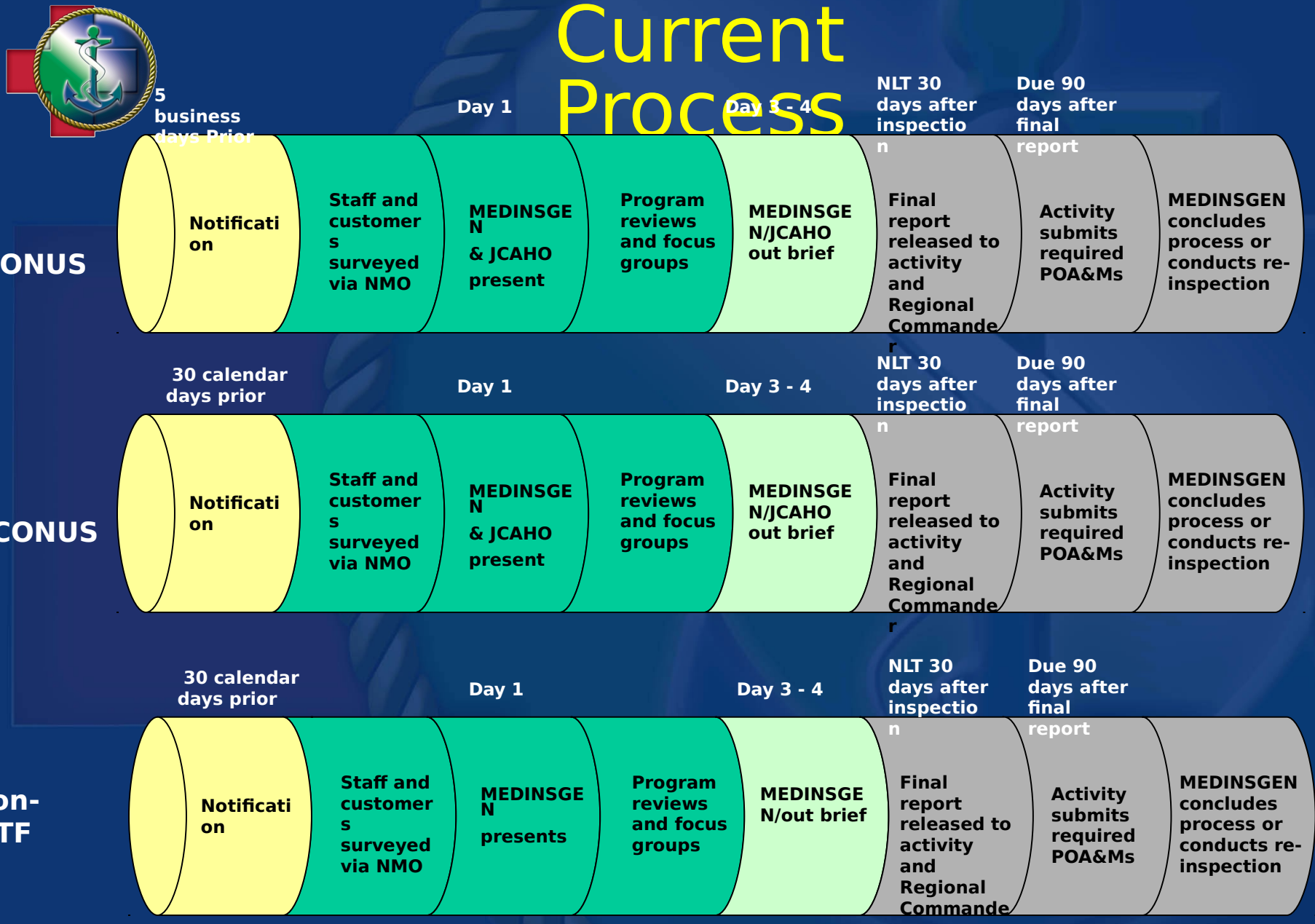
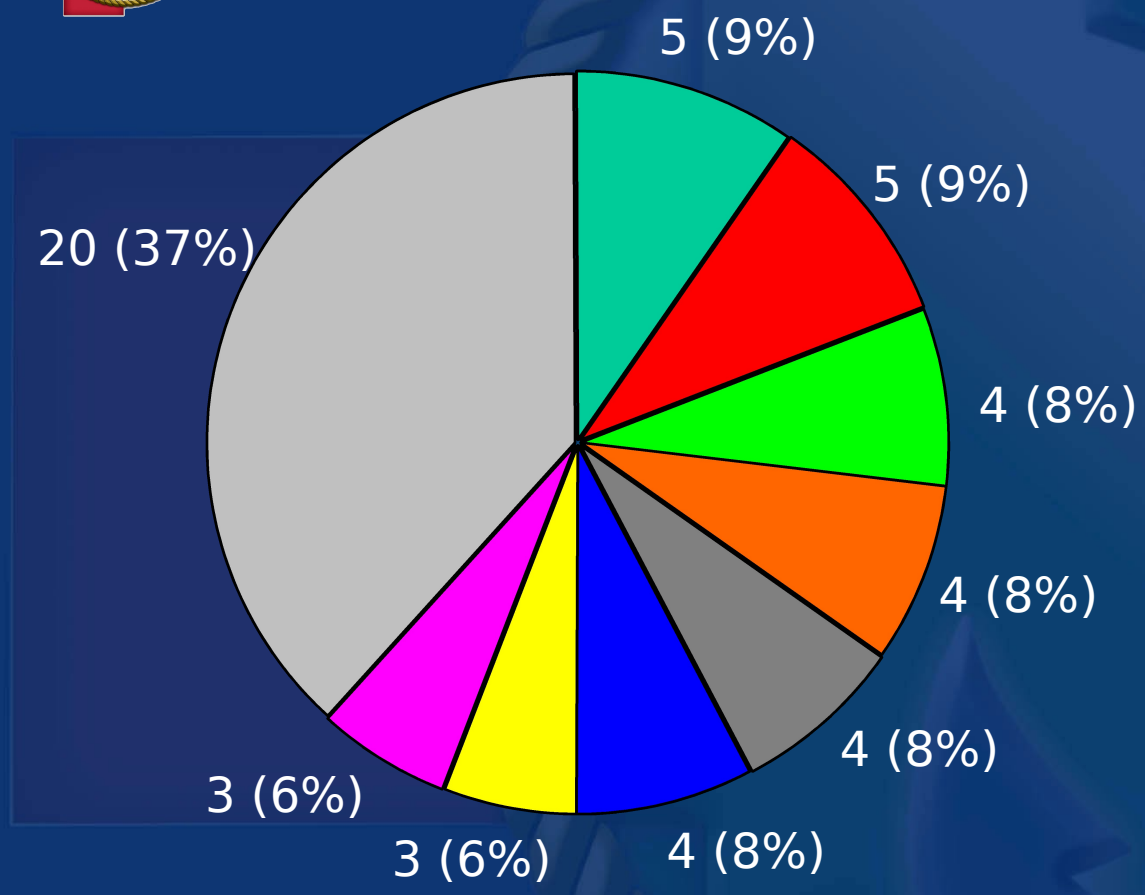
Objectives

- Current Process/Status
- MEDINSGEN Trends
- MEDOSH Trends
- Organizational/Systemic Trends
- JCAHO Trends
- JCAHO Issues
- Impact of Regionalization on MEDINSGEN Inspection Process
- Hotline Investigations

Current Process


CONUS
5 business days Prior
Notification
Staff and customers surveyed via NMO
Day 1
MEDINSGEN & JCAHO present
Program reviews and focus groups
Day 3 - 4
MEDINSGEN/JCAHO out brief
NLT 30 days after inspection
Final report released to activity and Regional Commander
Due 90 days after final report
Activity submits required POA&Ms
MEDINSGEN concludes process or conducts re-inspection
OCONUS
30 calendar days prior
Notification
Staff and customers surveyed via NMO
Day 1
MEDINSGEN & JCAHO present
Program reviews and focus groups
Day 3 - 4
MEDINSGEN/JCAHO out brief
NLT 30 days after inspection
Final report released to activity and Regional Commander
Due 90 days after final report
Activity submits required POA&Ms
MEDINSGEN concludes process or conducts re-inspection
Non-MTF
30 calendar days prior
Notification
Staff and customers surveyed via NMO
Day 1
MEDINSGEN presents
Program reviews and focus groups
Day 3 - 4
MEDINSGEN/out brief
NLT 30 days after inspection
Final report released to activity and Regional Commander
Due 90 days after final report
Activity submits required POA&Ms
MEDINSGEN concludes process or conducts re-inspection

MEDINSGEN Trends

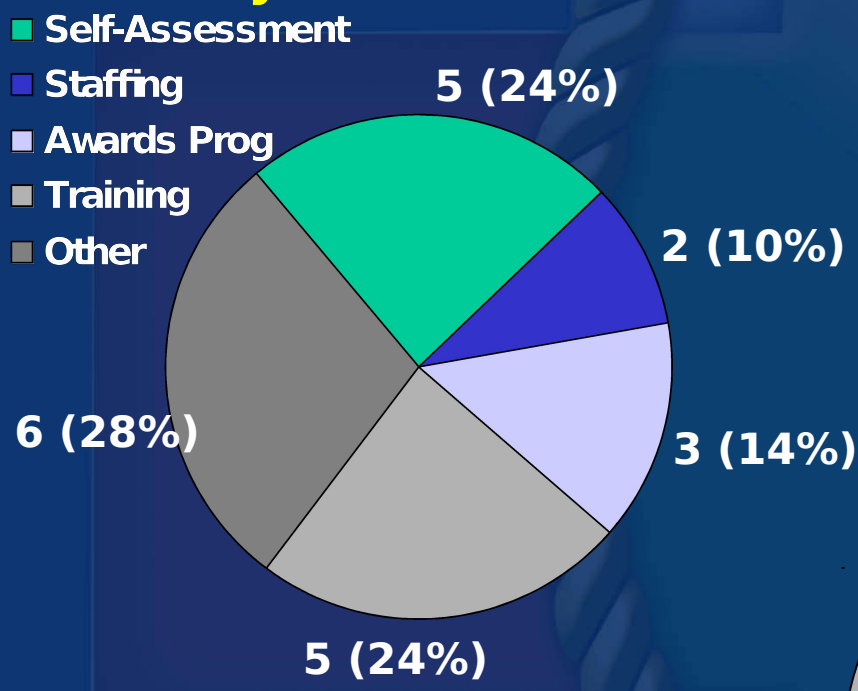


12 Commands Inspected During CY05

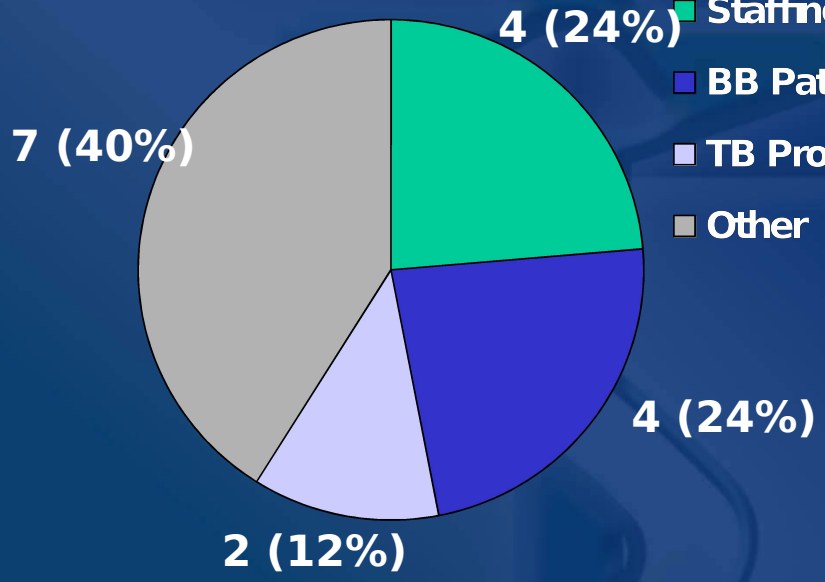
52 Findings Requiring Improvement

MEDOSH Trends

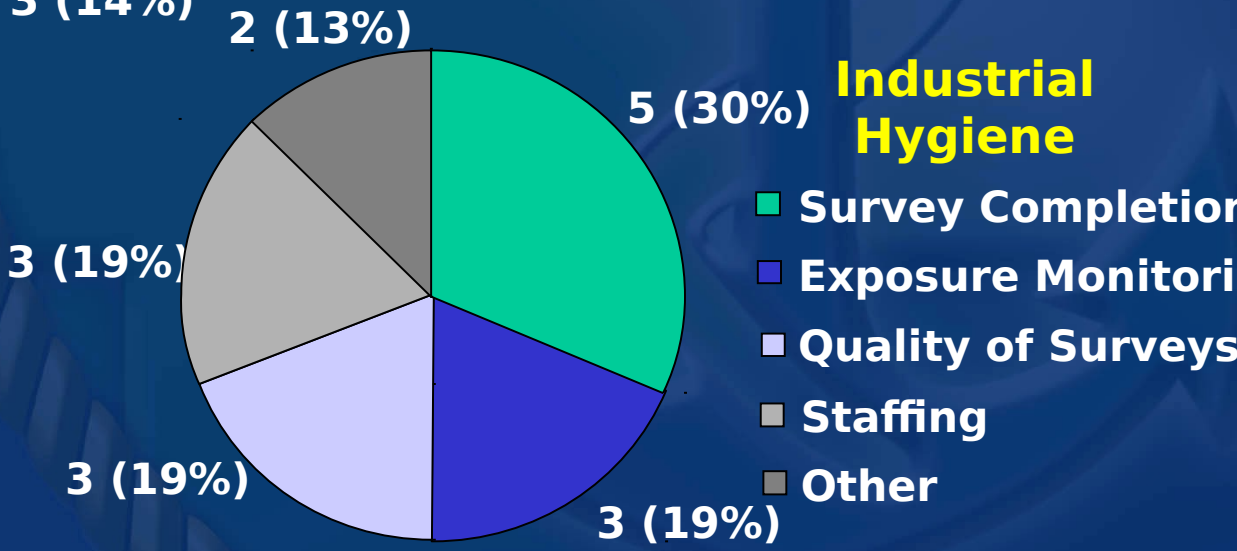
Safety



Occupational Medicine



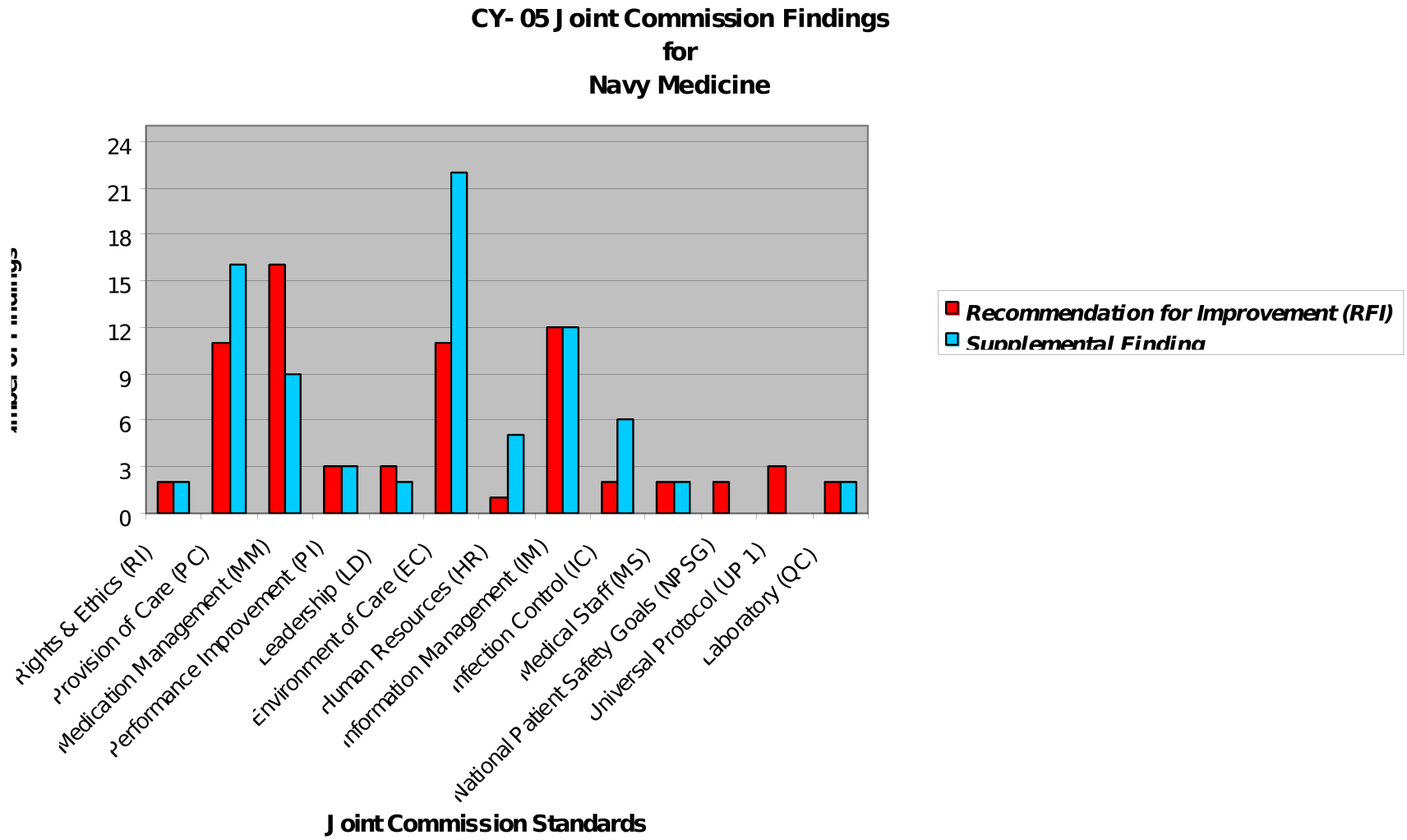
Industrial Hygiene



Organizational/Systemic Trends

- **CHCS II Deployment/Implementation**
  - **4 of 12 sites**
- **Continuity of Care/Referral Management**
  - **4 of 12 sites**

JCAHO Trends



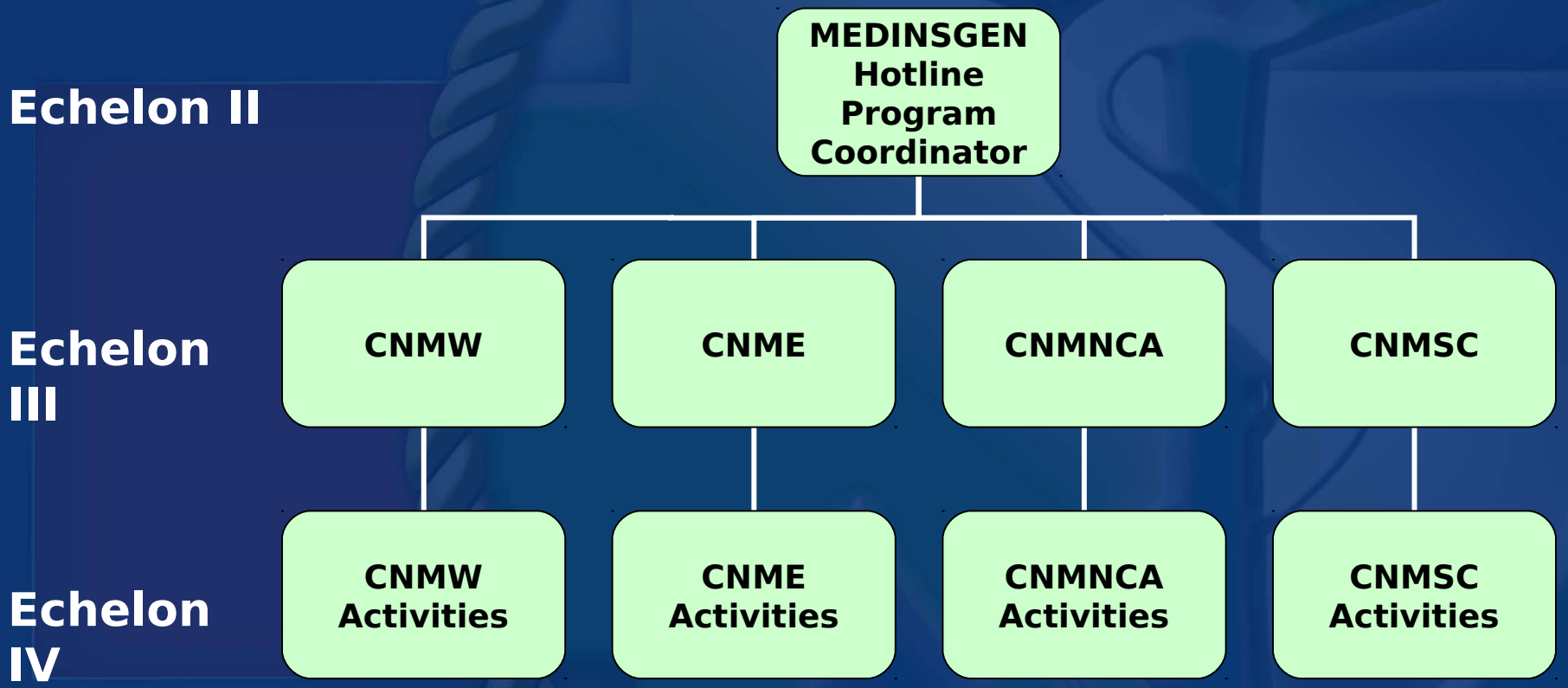
JCAHO Issues

- **Periodic Performance Review (PPR)**
- **Surveyor out brief vs. final survey results**
- **Potential increase of Requirements for Improvement**
- **New Emergency Management Tracer >200 beds**

Impact of Regionalization on MEDINSGEN Inspections

- **NAVINSGEN**
  - **Improved working relationships and communication**
- **CNI**
  - **Hotline Investigations for BSO 18 transferred to Navy Medicine**
  - **Programs formerly reviewed by RLCs transferred to Navy Medicine**
  - **Opportunity to share/augment expertise**
- **HQMC(IGMC)**
  - **Pending MOU to delineate roles and responsibilities for hotline complaints**
- **MEDINSGEN**
  - **Echelon III inspections beginning FY07**
- **MEDOSH**
  - **Establish MEDOSH billet at MEDINSGEN**
  - **Regional Command responsibility for MEDOSH oversight**

Hotline Investigation Structu



Hotline Investigations

- BUMED Hotline Instruction (Routing)
- Certified Investigators (waivers & scheduled training)
- Cases referred to higher authority
  - When case involves Flag or Commanding Officer
  - Improper mental health referral
  - Cases of retaliation or whistleblower
- Predominant Reasons for Hotline Complaints
  - Waste, Fraud and Inefficiency Requirement
  - Three “A”s –Avarice, Adultery, Arrogance
  - Perception of retaliation in performance appraisal
  - Mental Health Referral
  - HIPAA Violations